

P07000120997

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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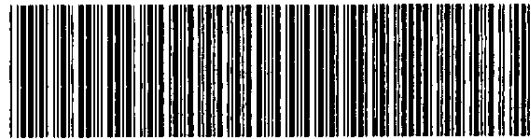
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

*2-1-11*

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** FRICKE PEST SERVICES INC.

(Name of Corporation)

**DOCUMENT NUMBER:** P07000120997

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

STEVEN MARC FRICKE

(Name of Person)

FRICKE PEST SERVICES INC.

(Name of Firm/Company)

4543 NORTHGATE CT.

(Address)

SARASOTA, FL. 34234

(City/State and Zip Code)

For further information concerning this matter, please call:

STEVEN FRICKE

(Name of Person)

at ( 941 ) 355 6300

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Street Address:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Mailing Address:**

Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, WALTER FRICKE, hereby resign as PRESIDENT  
(Title)

of FRICKE PEST SERVICES INC  
(Name of Corporation)

P07000120997, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(Signature of resigning officer/director)

**FILED**  
11 JAN 31 PM 1:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILING FEE IS \$35.00**

**Make checks payable to Florida Department of State and mail to:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314